



AF 12133

FORM PTO-1083

81800.0153

In re application of:
Yoshinori MURATA
Serial No: 09/825,200
Filed: April 2, 2001
For: COMMUNICATION TERMINAL DEVICE AND
COMMUNICATION METHOD

Art Unit: 2133
Examiner: examiner

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:
Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450, on
May 6, 2004
Date of Deposit
Anthony J. Orler, Reg. No. 41,232
Signature
05/06/04
Date

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

MAY 12 2004

Technology Center 2100

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
☐ A certified copy of _ Patent Application No. _ filed _ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	20	-20	24 **	0	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	3	-3	3 ***	0	LG=\$86 SM=\$43	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145	\$ 0
TOTAL						\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$-0- to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
☐ A check in the amount of \$-0- to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARRISON LLP.

By:
Anthony J. Orler
Registration No. 41,232
Attorney for Applicant(s)

Date: May 6, 2004

Biltmore Tower
500 South Grand Avenue, Suite 1900
Los Angeles, California 90071
Telephone: 213 337-6700
Facsimile: 213 337-6701